

Maryland Health Quality and Cost Council

Updates on Health Enterprise Zones (HEZs)

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Disparities

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March 18, 2013

“Though Maryland has some of the finest health care resources in the world, far too many communities in our state lack access to fundamental health care services, Health Enterprise Zones will empower communities to expand community health resources to improve health, expand access to health care, and reduce health care costs.”



— Lt. Governor Anthony G. Brown

THE MARYLAND HEALTH IMPROVEMENT AND DISPARITIES REDUCTION ACT



The Maryland Health Improvement and Disparities Reduction Act (SB 234) was signed on April 10, 2012.

The new law (http://mlis.state.md.us/2012rs/chapters_noln/Ch_3_sb0234T.pdf) establishes a process whereby the Secretary of the Department of Health and Mental Hygiene, in collaboration with the Community Health Resources Commission, will designate Health Enterprise Zones (HEZ).

The **purpose** of these zones will be to reduce health disparities, improve health outcomes, and reduce health costs and hospital admissions and readmissions in specific areas of the State.

The bill contains several possible **incentives** that can be utilized to address disparities within the HEZ including:

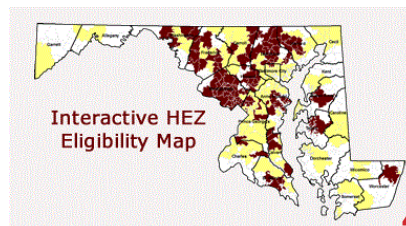
- Loan assistance repayment;
- Income tax credits;
- Priority to enter the Maryland Patient Centered Medical Home Program;
- Grant funding from CHRC; and
- Priority for receiving funds for establishing an electronic health records program.

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ELIGIBILITY CRITERIA AND DATA



- An HEZ must be a community, or a contiguous cluster of communities, defined by zip code boundaries (one or multiple zip codes).
- An HEZ must have a resident population of at least 5,000 people.
- An HEZ must demonstrate economic disadvantage:
 - Medicaid enrollment rate; or
 - WIC participation rate.
- An HEZ must demonstrate poor health outcomes:
 - A lower life expectancy; or
 - Percentage of low birth weight infants.



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HEZ SELECTION PRINCIPLES



- | | |
|-------------------------|-------------------------------------|
| 1. Purpose | 8. Coalition |
| 2. Description of need | 9. Work-plan |
| 3. Core disease targets | 10. Program Management and Guidance |
| 4. Goals | 11. Sustainability |
| 5. Strategy | 12. Evaluation |
| 6. Cultural competence | 13. Collaboration |
| 7. Balance | |

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ELIGIBLE HEZ APPLICANTS



Non-profit community-based organizations and local government agencies will be eligible to submit an application for HEZ designation on behalf of an area or community.

The state is encouraging HEZ applications to reflect inclusion, community participation, collaboration, and support the priorities identified in the Local Health Improvement Process.

The application for HEZ designation will be combination of both demonstrated need and intervention strategies to improve health outcomes in the potential Zone.

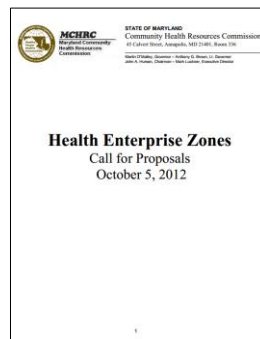
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CALL FOR PROPOSALS AND 19 APPLICATIONS RECEIVED

The HEZ Call for Proposals was released on October 2012;

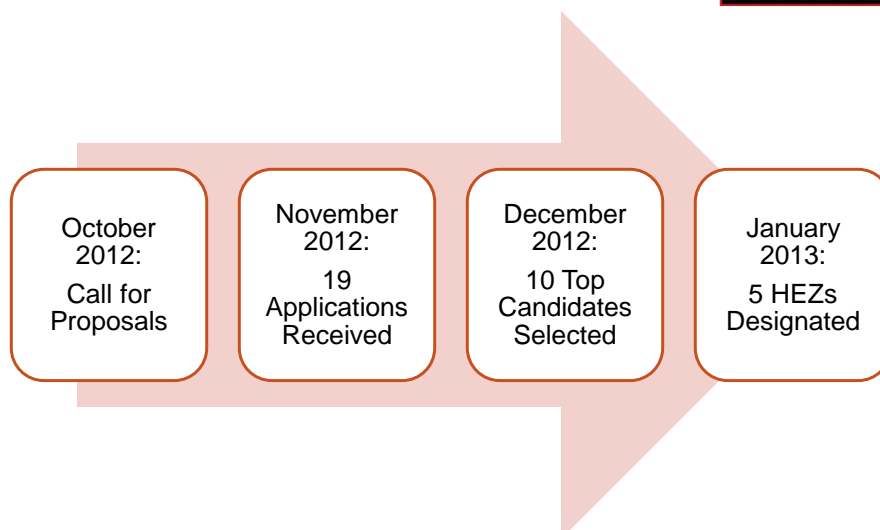
19 HEZ proposals were received:

- Allegany County Health Department;
- Primary Care Coalition of Montgomery County
- Care for your Health
- Somerset County Health Department
- Bon Secours Hospital
- Dorchester County Health Department
- Cecil County Health Department
- Prince George's County Health Department
- Charles County Department of Health
- Baltimore County Department of Health
- St. Mary's Hospital of St. Mary's County
- MedChi – Chestertown
- Lower Shore Clinic
- Sisters Together And Reaching-East Baltimore HEZ Collaborative
- Calvert Memorial Hospital
- Laurel Regional Hospital/Dimensions Healthcare System
- Asian American Center of Frederick/ L.I.F.E. & Discovery, Inc
- GOSPEL/Allen Chapel AME
- Anne Arundel Medical Center



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SELECTION PROCESS



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5 HEZ DESIGNATIONS



Following is an overview of the 5 Health Enterprise Zone Designations:

- St. Mary's Hospital, "Greater Lexington Park"
- Dorchester County Health Department, "Competent Care Connections"
- Prince George's Health Department
- Anne Arundel Health System
- Bon Secours Baltimore Health System/ West Baltimore Primary Care Access Collaborative



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BALTIMORE CITY DESIGNATION



Bon Secours Hospital/West Baltimore Primary Care Access Collaborative (21216, 21217, 21223, and 21229; Urban)

The proposal focuses on expanding access to **primary and preventative care** and creating **a community health infrastructure** to serve residents in West Baltimore, a community facing some of the highest disease burden rates and worst social determinants of health care in the state.

Specific outcomes targeted in this proposal include **a reduction in cardiovascular disease rates and hospital emergency department visits associated with cardiovascular disease**. The proposal is innovative in its vision of enabling residents of the Zone to begin careers in health care by providing **training and employment opportunities for 30 new health care paraprofessionals**.



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ST. MARY'S COUNTY DESIGNATION



St. Mary's Hospital/"Greater Lexington Park" (20653, 20634, and 20667; Rural)

The St. Mary's Hospital for the Greater Lexington Park HEZ seeks to improve public health outcomes in the Lexington Park, Great Mills, and Park Hall communities of St. Mary's County, areas experiencing a dearth of primary care physicians, by creating a new community health care center in Lexington Park and adding five new primary care practitioners, one psychiatrist, and two licensed social workers in the Zone.

Specific outcomes targeted in this proposal are reductions in preventable hospital emergency department visits, admissions, and readmissions for chronic diseases such as hypertension, asthma, and diabetes, and improved overall integration of primary care and behavioral health services in the community.

Innovative strategies contained in this proposal include the development of a "health care transportation route" to address barriers to accessing health care experienced in the underserved communities in this rural area of the state.



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DORCHESTER COUNTY DESIGNATION



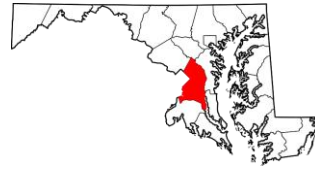
Dorchester County Health Department/"Competent Care Connections" (21613, 21631, 21664, 21659, 21835, 21643, and 21632; Rural)

The HEZ plan of Competent Care Connections seeks to improve public health outcomes in Dorchester and Caroline Counties, two jurisdictions with some of the worst health outcomes in the state, by adding a total of 18 new providers in the Zone, which includes 2 primary care physicians, one nurse practitioner, one registered nurse, eight social workers, and six community health outreach workers, and creating a new mobile mental health crisis team focused exclusively on serving Dorchester and Caroline Counties.

Specific outcomes targeted in this proposal are reductions in adult and childhood obesity; reductions in the incidence of diabetes and hypertension; and decreases in hospital emergency department visits for these conditions.

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PRINCE GEORGE'S COUNTY DESIGNATION



Prince George's County Health Department (20743; Urban/Suburban)

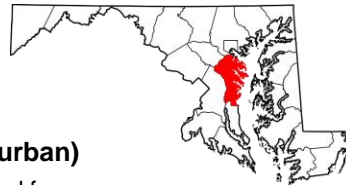
The proposal submitted by Prince George's County Health Department focuses on Capitol Heights. This proposal would create **five new patient-centered medical homes** in the Zone to serve a minimum of 10,000 residents and would add a total of **25 new providers** (eleven full-time primary care physicians; five full-time nurse practitioners; two full-time dentists; and seven community health workers).

Specific outcomes targeted in this proposal are reductions in **preventative hospital emergency department visits for chronic condition; reductions in frequency of low birth weight infants and overall improvement in birth outcomes; and sustainable expansion of the primary and community health workforce** in the Zone.

The new health care delivery sites in Capitol Heights will create a blue-print for establishing and sustaining patient-centered medical homes that can be replicated in other parts of Prince George's County and perhaps the state.

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ANNE ARUNDEL COUNTY DESIGNATION



Anne Arundel Health System (21401; Suburban)

The Anne Arundel Health System proposal focuses on an underserved area in downtown Annapolis. This proposal establishes a **new patient-centered medical home (PCMH)** by adding **one full-time physician, two full-time medical assistants, and one full-time case manager**. The PCMH at Morris Blum, located within public housing, will have capacity to serve additional patients within a one mile radius and others within the city of Annapolis. The primary care physician will provide on-site patient-centered care 40 hours per week, 5 days per week. In addition, the Morris Blum primary care office will be on a full-service electronic medical record which connects the hospital, area specialists, and patients to their medical records.

Specific outcomes targeted in this proposal include **improved chronic disease management and Consequent decreases in medical 911 calls, emergency room visits, hospital admissions and readmissions.**



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ROLE OF DHMH AND MARYLAND COMMUNITY HEALTH RESOURCES COMMISSION (CHRC)



- The HEZs are designated with the collaboration of the Secretary of the Department of Health and Mental Hygiene (DHMH), in collaboration with the Community Health Resources Commission (CHRC);
- Maryland Health Care Commission (CHRC) establishes and incorporates a standard set of measures regarding racial and ethnic variations in quality and outcomes and track health insurance carriers' and hospitals' efforts to combat disparities.
- The FY 2013 budget allocates \$4 million to the Community Health Resources Commission to fund the HEZ's.

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NEXT PHASE



- **Hold work sessions with each designated HEZ to refine startup and implementation tasks;**
- **Define outcome measures and sources of data that will support implementation of tasks in order to achieve desired outcome measures;**
- **Review and assist HEZs in developing a detailed internal evaluation process;**
- **Participate with the Maryland Community Health Resource Commission (MCHRC) in review of process reports, provisions of technical assistance (TA) and other support to enable success of the HEZ.**

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“ I believe that every Marylander, of every race and ethnicity, in every part of our state, should have the same chance to live a healthy life and to maximize their contributions to society. By continuing to work together, we can make that ideal a reality. ”

— Lt. Governor Anthony G. Brown



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CONTACT INFORMATION



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Office of Minority Health and Health Disparities Website:

<http://dhmh.maryland.gov/mhhd>

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